



Judicial Council of California
ADMINISTRATIVE OFFICE OF THE COURTS

455 Golden Gate Avenue • San Francisco, California 94102-3688
Telephone 415-865-4200 • Fax 415-865-4205 • TDD 415-865-4272

MEMORANDUM

Date	Action Requested
September 1, 2010	Submit Required Forms and Fee
To	Deadline
All Certified Court and Registered Interpreters	December 31, 2010
From	Contact
Debbie Chong-Manguiat Senior Administrative Coordinator Court Interpreters Program	Debbie Chong-Manguiat 415-865-7596 debbie.chong-manguiat@jud.ca.gov
Subject	
2010 Renewal and Compliance Notice	

This packet contains the necessary forms and instructions needed to comply with your renewal requirements. Enclosed you will find:

- *Blue* Annual Renewal Fee form.
- *Green* Information Update/Verification Form. This year we are requesting **all** interpreters to submit this form in order to verify your contact information and update as needed.
- If your two year continuing education and professional requirements compliance period ends December 31, 2010, the compliance forms and instructions for completion are also enclosed. (Note: Your badge indicates your compliance year in the lower right corner.)
- A self addressed envelope.

Please READ and note the following important information:

- For interpreters whose compliance period ends December 31, 2010 - **All required education and professional experience MUST be completed by December 31, 2010. CIMCE credit will not be granted for any continuing education courses taken or completed after December 31, 2010.**

September 1, 2010

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- All interpreters must submit their annual renewal fee of \$100 and completed compliance forms (if applicable) to the Administrative Office of the Courts by December 31, 2010. **Payment or forms not received by December 31, 2010 will incur a \$50 late fee.**
- If your continuing education and professional experience compliance forms are not due this year, you must still submit your \$100 annual renewal fee and it **must be received by December 31, 2010 to avoid an additional \$50 late fee.**
- Forms and payments received after December 31, 2010 will be accepted ONLY until March 1, 2011 and must include the \$50 late fee.
- Forms and payments received **after March 1, 2011 will not be accepted**, resulting in the loss of your certified or registered status. Your name will be removed from the Judicial Council Master List effective April 1, 2011.

Please refer to the *Compliance Requirements for Certified Court Interpreters and Registered Interpreters of Nondesignated Languages* available on the resources page of our website: <http://www.courtinfo.ca.gov/courtinterpreters>. The 2010 compliance form is also available on our website as a fillable form:

<http://www.courtinfo.ca.gov/programs/courtinterpreters/documents/complfm99.pdf> .

Make your check, cashier's check, or money order payable to the **State of California** and mail to:

Administrative Office of the Courts
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, CA 94102-3688

Returned checks are subject to a \$15 return check fee.

Please remit your payment on time to avoid a \$50 late fee. Use the self addressed return envelope provided and enclose:

- ☐ Payment (money order, cashiers or personal check).
- ☐ Completed annual renewal notice (Blue).
- ☐ Information Update/Verification Form (Green).
- ☐ Completed education and professional experience compliance form (if applicable).

We encourage you to obtain proof of delivery. Your cancelled check serves as your receipt.

Enclosures

cc: Court Executive Officers
Regional Interpreter Coordinators
Local Interpreter Coordinators



ADMINISTRATIVE OFFICE
OF THE COURTS

COURT INTERPRETERS PROGRAM

ANNUAL RENEWAL FEE NOTICE

Covers the period January 1–December 31, 2011

Complete this form and return it with your payment

Name: _____
(first) (middle) (last)

Certification #: _____

or

Registration #: _____

E-mail: _____

- You must submit your annual \$100 renewal fee before December 31, 2010. **Payment must be received by December 31, 2010.**
- **If we do not receive your fee by December 31, 2010, you will be assessed a \$50 late fee.**
- If you pay after the December 31, 2010 deadline you must submit payment of **\$150** (annual fee plus late fee) **before March 1, 2011** to avoid loss of certification or registration.
- If we do not receive your required payment by March 1, 2011 you will lose your certified or registered status and your name will be removed from the *Judicial Council Master List of Certified Court Interpreters of Designated Languages and Registered Interpreters of Nondesignated Languages* effective April 1, 2011.

	TOTAL DUE	Must be received by
Annual Fee	\$ 100	December 31, 2010
Add late fee if not received by December 31, 2010	\$150	March 1, 2011
If not received by March 1, 2011 you will lose your certification/registration		

Make your check, money order, or cashier's check payable to: **State of California** and mail to:

**Administrative Office of the Courts
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, CA 94102-3688**

Remember to include your Information Update/Verification Form

Returned checks are subject to a \$15 return check fee.

Questions? email us at courtinterpreters@jud.ca.gov or visit our website at
www.courtinfo.ca.gov/courtinterpreters.



ADMINISTRATIVE OFFICE
OF THE COURTS

COURT INTERPRETERS PROGRAM

2010 INFORMATION UPDATE/ VERIFICATION FORM

ALL INTERPRETERS: PLEASE FILL OUT ENTIRE FORM AND RETURN

We are requesting this so we can verify all contact information and update our records as needed.

Name: _____ (Is this a new name? Yes/No)

Certification or Registration Number: _____

Contact information, including phone numbers and e-mail address, will be published on the Master List on the public Web site and may also be provided, along with your mailing address, to trial court personnel on request, unless you indicate otherwise below. The Master List may be used by the courts, other state agencies, and the public to locate and contact interpreters for assignments. The information is also used by the AOC to contact you. Please make sure your information is kept up to date. It is your responsibility to notify the AOC immediately of any changes.

Mailing address (required)

Street/P.O. box: _____

City: _____ State: _____ Zip code: _____

County and State in which you live: _____

Residential address (optional) ☐ Check if same address as above

Street: _____

City: _____ State: _____ Zip code: _____

The following contact information will be published unless you check the box next to the item. Please complete.

☐ Home phone: (____) _____ ☐ Work phone: (____) _____

☐ Cell: (____) _____ ☐ Pager: (____) _____

☐ Fax: (____) _____ ☐ E-mail: _____

GEOGRAPHIC AVAILABILITY (Please *circle* all counties in which you are available to work)

- | | | | | | |
|----------------|----------------|--------------|--------------------|------------------|-------------------|
| 1 Alameda | 11 Glenn | 21 Marin | 31 Placer | 41 San Mateo | 51 Sutter |
| 2 Alpine | 12 Humboldt | 22 Mariposa | 32 Plumas | 42 Santa Barbara | 52 Tehama |
| 3 Amador | 13 Imperial | 23 Mendocino | 33 Riverside | 43 Santa Clara | 53 Trinity |
| 4 Butte | 14 Inyo | 24 Merced | 34 Sacramento | 44 Santa Cruz | 54 Tulare |
| 5 Calaveras | 15 Kern | 25 Modoc | 35 San Benito | 45 Shasta | 55 Tuolumne |
| 6 Colusa | 16 King | 26 Mono | 36 San Bernardino | 46 Sierra | 56 Ventura |
| 7 Contra Costa | 17 Lake | 27 Monterey | 37 San Diego | 47 Siskiyou | 57 Yolo |
| 8 Del Norte | 18 Lassen | 28 Napa | 38 San Francisco | 48 Solano | 58 Yuba |
| 9 El Dorado | 19 Los Angeles | 29 Nevada | 39 San Joaquin | 49 Sonoma | 59 Out of state |
| 10 Fresno | 20 Madera | 30 Orange | 40 San Luis Obispo | 50 Stanislaus | 60 All counties |
| | | | | | 62 Out of Country |

NAME CHANGE: If your name has changed please provide:

Former Name (as it appears on the Master List): _____

New Name _____

If you have changed your name, you will require a new badge. Please return this form along with a \$15 check, cashier's check, or money order payable to State of California. You will be charged \$15 for a returned check.

IDENTITY VERIFICATION

The following information is requested to verify your identity and *will not* be released:

California driver's license or ID #: _____ Expires: _____

Name as shown on my California driver's license or ID: _____

Social Security #: _____ - _____ - _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Judicial Council to release information contained herein, unless I have indicated otherwise.

Signature: _____ Date: _____

DECLARATION

I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct. I understand that any false or misleading statements may result in the forfeiture of my status as a certified court or registered interpreter and removal from the Judicial Council's Master List, in addition to other penalties provided by law.

Your full name (print clearly): _____

Signature: _____ Date: _____

Mail completed update form to:
**Administrative Office of the Courts
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, CA 94102-3688**

For additional information, e-mail courtinterpreters@jud.ca.gov or visit the website at www.courtinfo.ca.gov/courtinterpreters

Keep a copy of this completed form for your records.



Judicial Council of California

Administrative Office of the Courts

455 Golden Gate Avenue • San Francisco, California 94102 • Phone 415/865-7530 FAX 415/865-4341

INSTRUCTIONS FOR COMPLETING YOUR CONTINUING EDUCATION COMPLIANCE FORM

Section I — GENERAL INFORMATION

1. Fill in your full name as it appears on your interpreter identification badge.
2. Fill in your certification or registration number and language(s).
3. Fill in the compliance period dates (January 1, 2009 – December 31, 2010).

Section II — MANDATORY CONTINUING EDUCATION REQUIREMENT

Fill in this section *only* if this is your *first* compliance period.

4. Fill in the location and date of the Ethics Workshop that you attended. The workshop, a one-time requirement, must be taken during your first compliance period.
5. If you did not attend the Ethics Workshop, check the box stating that you did not comply. Noncompliance means you will not be eligible to renew your certification.
6. *Registered interpreters only.* Fill in the location and date of the Orientation Workshop that you attended. The workshop, a one-time requirement, must be taken during your first compliance period.
7. *Registered interpreters only.* If you did not attend the Orientation Workshop, check the box stating that you did not comply. Noncompliance means you will not be eligible to renew your registration.

Section III — SKILLS AND KNOWLEDGE

8. Indicate your continuing education activities. You are required to complete 30 hours of continuing education activities for each two-year compliance period as follows:

First Compliance Period for Certified Interpreters

- Mandatory Ethics Workshop, 6 hours.
- Participatory activities in the skills and knowledge category, at least 12 hours.
- “Self-study” in the skills and knowledge category, up to 12 hours.
- A total of 30 hours is required.

First Compliance Period for Registered Interpreters

- Mandatory Ethics Workshop, 6 hours.
- Mandatory Orientation Workshop, 6 hours.
- Participatory activities in the skills and knowledge category, **at least** 6 hours.
- “Self-study” in the skills and knowledge category, up to 12 hours.
- A total of 30 hours is required.

Subsequent Compliance Periods for Certified and Registered Court Interpreters (who have previously completed their first compliance period)

- Participatory activities in the skills and knowledge category, **at least** 15 hours.
- “Self-study” in the skills and knowledge category, **up to** 15 hours.
- A total of 30 hours is required.

First, list your participatory continuing education activities. These are activities specifically approved for Court Interpreter Minimum Continuing Education (CIMCE) credit. All activities *must* include a CIMCE number. If you do not include all CIMCE numbers, the form will be considered incomplete and returned to you. **(Do not attach additional documentation verifying your attendance.)**

Second, list all of your “self-study” activities, if applicable. Note: In the “CIMCE NO.” column fill in the code “SS” for self-study.

Third, list any educational activities that are approved by the State Bar for Minimum Continuing Legal Education credit (MCLE). A CIMCE number is not required. Instead, attach a copy of your certificate of completion or documentation verifying your attendance.

Remember that continuing education refers to seminars, workshops, or course work taken *after* you become certified or registered.

Section IV — PROFESSIONAL EXPERIENCE

9. Fill in the professional experience section. List 40 professional assignments, indicating dates, case numbers, case names, and locations.
10. Please sign, date, and submit your form to:
Administrative Office of the Courts
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, California 94102-3688

We recommend that you send your completed and signed forms via certified mail or obtain proof of mailing from your carrier. Please retain a copy of the forms for your records.

All continuing education credits must be earned during the two year compliance period ending December 31, 2010, and all forms must be received by December 31 of the year that your compliance period ends.

**Please sign, date, and provide all required information.
Forms that are incomplete will be returned.**

CONTINUING EDUCATION COMPLIANCE FORM

Due December 31, 2010

Please type or print clearly and legibly in ink.

Section I — GENERAL INFORMATION

1. FULL NAME (as it appears on your interpreter identification badge):

2. CERTIFICATION NUMBER: _____ LANGUAGE(S) _____

REGISTRATION NUMBER: _____ LANGUAGE(S) _____

3. THIS COMPLIANCE PERIOD IS FROM (mm/dd/yy) _____ TO (mm/dd/yy) _____

Note: The compliance period is at least two years and ends on December 31. Please submit only one compliance form for each two-year compliance period. Example: If an interpreter was certified or registered with the Judicial Council in June 2006, his/her first compliance period would end December 31, 2008. Participatory continuing education activities taken June 2006 through December 31, 2008, would apply. Thus, the interpreter must file his or her compliance form by December 31, 2008.

Section II — MANDATORY CONTINUING EDUCATION REQUIREMENT (Complete only if this is your first compliance period.)

4. WHERE AND WHEN DID YOU ATTEND THE ETHICS WORKSHOP?

City _____ Date _____

5. ☐ I DID NOT COMPLY WITH THIS REQUIREMENT AND I UNDERSTAND THAT THIS WILL AFFECT MY CERTIFICATION STATUS.

6. (Registered interpreters only) WHERE AND WHEN DID YOU ATTEND THE ORIENTATION WORKSHOP?

City _____ Date _____

7. ☐ (Registered interpreters only) I DID NOT COMPLY WITH THIS REQUIREMENT AND I UNDERSTAND THAT THIS WILL AFFECT MY REGISTRATION STATUS.

Section III — SKILLS AND KNOWLEDGE

8. List your continuing education activities during the compliance period. Include all "participatory" hours first, then "self-study" hours, and MCLE activities last.

DATE	TITLE OF ACTIVITY	NAME OF PROVIDER OR "SELF-STUDY"	NO. OF HOURS	CIMCE NO.
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Section III — SKILLS AND KNOWLEDGE (Con't)

[illegible]

TOTAL HOURS:

10

Section IV — PROFESSIONAL EXPERIENCE

9. LIST THE 40 PROFESSIONAL ASSIGNMENTS IN WHICH YOU HAVE PARTICIPATED DURING THE COMPLIANCE PERIOD (*an "assignment" is a law-related interpreting duty for a specific case, performed on a specific date*). **Submission of invoices or letters from court administrators in lieu of listing 40 professional assignments will not be accepted.**

	DATE(S)	CASE NUMBER	CASE NAME	LOCATION
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
(19)				
(20)				
(21)				
(22)				
(23)				
(24)				
(25)				

Section IV — PROFESSIONAL EXPERIENCE (Con't)

	DATE(S)	CASE NUMBER	CASE NAME	LOCATION
(26)				
(27)				
(28)				
(29)				
(30)				
(31)				
(32)				
(33)				
(34)				
(35)				
(36)				
(37)				
(38)				
(39)				
(40)				

I declare under penalty of perjury under the laws of the State of California that the information provided above is true and correct.

10. _____
Signature Date

Please mail to:

Administrative Office of the Courts
Court Interpreters Program
455 Golden Gate Avenue
San Francisco, California 94102-3688

**Please sign, date, and provide all required information.
Forms that are incomplete will be returned.**